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United States Bankruptcy Court Northern District of Illinois						Vol	untary Petition	
Name of Debtor (if individual, enter Last, First, Torres, Nicholas	Middle):			of Joint De	ebtor (Spouse udia	(Last, First	, Middle):	
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): FKA Claudia Teana Romo					used by the J maiden, and			years
Last four digits of Soc. Sec. or Individual-Taxpa (if more than one, state all)	yer I.D. (ITIN)/Com	plete EIN	(if more	our digits of than one, state	all)	Individual-	Taxpayer I.I	D. (ITIN) No./Complete EIN
Street Address of Debtor (No. and Street, City, a 9231 W. Irving Park Rd Schiller Park, IL	_	ZIP Code	Street 923	Address of	Joint Debtor	•	reet, City, a	ZIP Code
County of Residence or of the Principal Place of Cook		60176	Count	•	ence or of the	Principal Pla	ace of Busir	60176
Mailing Address of Debtor (if different from stre	eet address):		Mailir	g Address	of Joint Debt	or (if differe	nt from stre	et address):
Location of Principal Assets of Business Debtor		ZIP Code						ZIP Code
(if different from street address above): Type of Debtor								
(Form of Organization) (Check one box) ■ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.) Chapter 15 Debtors	Nature of Business (Check one box) ☐ Health Care Business ☐ Single Asset Real Estate as def in 11 U.S.C. § 101 (51B) ☐ Railroad ☐ Stockbroker ☐ Commodity Broker ☐ Clearing Bank ☐ Other		efined	Chapt Chapt Chapt Chapt Chapt Chapt	er 7 er 9 er 11 er 12	of □ Cl of	hapter 15 Pe a Foreign M hapter 15 Pe	one box) etition for Recognition Main Proceeding etition for Recognition Nonmain Proceeding
Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending:	(Check box Debtor is a tax-ex under Title 26 of	Tax-Exempt Entity (Check box, if applicable) Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code). Debts are primarily or defined in 11 U.S.C. § "incurred by an indivi		onsumer debts, § 101(8) as idual primarily	for	☐ Debts are primarily business debts.		
□ Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. □ Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. □ Debt Check if: □ Debt Che				regate nonco \$2,490,925 (as boxes: ag filed with of the plan w	debtor as definess debtor as contingent liquida amount subject this petition.	defined in 11 to ated debts (exc to adjustment	C. § 101(51D U.S.C. § 101(: cluding debts t on 4/01/16 a	
Statistical/Administrative Information ☐ Debtor estimates that funds will be available ☐ Debtor estimates that, after any exempt prop there will be no funds available for distributi	erty is excluded and	administrative		es paid,		THIS	SPACE IS F	OR COURT USE ONLY
1- 50- 100- 200-	□ □ 1,000- 5,001- 5,000 10,000		5,001- 0,000	50,001- 100,000	OVER 100,000			
\$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 \$100,000 \$500,000 to \$1	\$1,000,001 \$10,000,001 to \$10 to \$50 million	to \$100 to] 100,000,001 \$500 illion	\$500,000,001 to \$1 billion	More than \$1 billion			
\$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 \$100,000 \$500,000 to \$1	\$1,000,001 \$10,000,001 to \$10 to \$50 million million	to \$100 to		\$500,000,001 to \$1 billion				

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B1 (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition Torres, Nicholas Torres, Claudia (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Location Date Filed: Where Filed: - None -Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. \mathbf{X} /s/ Jennifer A. Blanc March 9, 2015 Signature of Attorney for Debtor(s) (Date) Jennifer A. Blanc 6257505 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

B1 (Official Form 1)(04/13)

Voluntary Petition

Name of Debtor(s):

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Nicholas Torres

Signature of Debtor Nicholas Torres

X /s/ Claudia Torres

Signature of Joint Debtor Claudia Torres

(This page must be completed and filed in every case)

Telephone Number (If not represented by attorney)

March 9, 2015

Date

Signature of Attorney*

X /s/ Jennifer A. Blanc

Signature of Attorney for Debtor(s)

Jennifer A. Blanc 6257505

Printed Name of Attorney for Debtor(s)

Law Offices of Jennifer A. Blanc

Firm Name

1 Westbrook Corporate Center Suite 300

Westchester, IL 60154

Address

Email: blanclaw@sbcglobal.net

708-848-5291

Telephone Number

March 9, 2015

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Torres, Nicholas

Torres, Claudia

Signatures

Signature of a Foreign Representative

Page 3

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

7	v
7	١
	2

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

	_	

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Northern District of Illinois

In re	Nicholas Torres Claudia Torres		Case No.	
111.10	Claudia Torres	Debtor(s)	Chapter	7

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] ____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2
☐ 4. I am not required to receive a credit cou	nseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for d	letermination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. §	109(h)(4) as impaired by reason of mental illness or
± • ·	alizing and making rational decisions with respect to
financial responsibilities.);	
1 //	109(h)(4) as physically impaired to the extent of being
	in a credit counseling briefing in person, by telephone, or
through the Internet.);	
☐ Active military duty in a military c	ombat zone.
☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in	administrator has determined that the credit counseling this district.
I certify under penalty of perjury that the	information provided above is true and correct.
Signature of Debtor:	/s/ Nicholas Torres
_	Nicholas Torres
Date: March 9, 2015	

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B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Northern District of Illinois

In re	Nicholas Torres Claudia Torres		Case No.	
		Debtor(s)	Chapter	7

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] ____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2
☐ 4. I am not required to receive a credit cou	inseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for a	letermination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. §	§ 109(h)(4) as impaired by reason of mental illness or
* * * * * * * * * * * * * * * * * * *	alizing and making rational decisions with respect to
financial responsibilities.);	
1 / /	109(h)(4) as physically impaired to the extent of being
• •	in a credit counseling briefing in person, by telephone, or
through the Internet.);	8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
☐ Active military duty in a military c	ombat zone.
☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in	administrator has determined that the credit counseling this district.
I certify under penalty of perjury that the	information provided above is true and correct.
Signature of Debtor:	/s/ Claudia Torres
	Claudia Torres
Date: March 9, 2015	

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B6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Northern District of Illinois

In re	Nicholas Torres,		Case No.	
	Claudia Torres			
		Debtors	Chapter	7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	7,894.76		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		1,012.67	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	11		76,363.91	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			3,326.70
J - Current Expenditures of Individual Debtor(s)	Yes	2			3,434.55
Total Number of Sheets of ALL Schedu	ıles	25			
	T	otal Assets	7,894.76		
			Total Liabilities	77,376.58	

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B 6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Northern District of Illinois

In re	Nicholas Torres,		Case No.	
	Claudia Torres			
_		Debtors	Chapter	7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. \S 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	1,012.67
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	1,012.67

State the following:

Average Income (from Schedule I, Line 12)	3,326.70
Average Expenses (from Schedule J, Line 22)	3,434.55
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	3,351.04

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	1,012.67	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		76,363.91
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		76,363.91

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B6A (Official Form 6A) (12/07)

In re	Nicholas Torres,	Case No.
	Claudia Torres	

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property Husband, Wife, Joint, or Community Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Amount of Secured Claim

None

Sub-Total > **0.00** (Total of this page)

Total > **0.00**

(Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

In re	Nicholas Torres,	Case No.
	Claudia Torres	

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	JOHIL OI	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	X		
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan,	Checking Account: Location: Central Credit Union 1001 Mannheim Road, Bellwood, II 60104	W	1.74
	thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	Checking Account: Location: Bank of America	н	50.25
	coopolad res.	Savings Account: Location: Central Credit Union	W	25.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	Security Deposit: Security Deposit Held By Landlord	W	1,000.00
4.	Household goods and furnishings, including audio, video, and computer equipment.	x		
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	x		
6.	Wearing apparel.	x		
7.	Furs and jewelry.	x		
8.	Firearms and sports, photographic, and other hobby equipment.	x		
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	x		
10.	Annuities. Itemize and name each issuer.	x		

Sub-Total > 1,076.99 (Total of this page)

² continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In	re Nicholas Torres, Claudia Torres		C	ase No	
		SCHEI	Debtors DULE B - PERSONAL PROPERT (Continuation Sheet)	ΓY	
	Type of Property	N O N E	Description and Location of Property	Joint, or	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		ement: tion: Mass Mutual	н	1,302.72
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debto including tax refunds. Give particula	,1	Refund:	J	4,515.05
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
			(Те	Sub-Total otal of this page)	> 5,817.77
Shee	et <u>1</u> of <u>2</u> continuation sheets	attached			

to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Nicholas Torres,	Case No.
	Claudia Torres	

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	A L	uto: GMC 1996 Yukon, 236,000 ocation: 1743 N 19th Ave Melrose Park, IL 60160	Н	1,000.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > (Total of this page)

1,000.00

Total > **7,894.76**

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

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B6C (Official Form 6C) (4/13)

In re	Nicholas Torres,	Case No.
	Claudia Torres	

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:	☐ Check if debtor claims a homestead exemption that exceeds
(Check one box)	\$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafte.
□ 11 U.S.C. §522(b)(2)	with respect to cases commenced on or after the date of adjustment.)
■ 11 U.S.C. 8522(b)(3)	

1 1 0.5.e. \$522(0)(5)			
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Checking, Savings, or Other Financial Accounts, C	Certificates of Deposit		
Checking Account: Location: Central Credit Union 1001 Mannheim Road, Bellwood, Il 60104	40 ILCS 5/16-190, 5/17-151	1.74	1.74
Checking Account: Location: Bank of America	735 ILCS 5/12-1001(b)	50.25	50.25
Savings Account: Location: Central Credit Union	735 ILCS 5/12-1001(b)	25.00	25.00
Interests in IRA, ERISA, Keogh, or Other Pension of	or Profit Sharing Plans		
Retirement: Location: Mass Mutual	735 ILCS 5/12-1006	1,302.72	1,302.72
Other Liquidated Debts Owing Debtor Including Ta	x Refund		
Tax Refund:	735 ILCS 5/12-1001(b)	4,515.05	4,515.05
Automobiles, Trucks, Trailers, and Other Vehicles Auto: GMC 1996 Yukon, 236,000 Location: 1743 N 19th Ave Melrose Park, IL 60160	735 ILCS 5/12-1001(c)	1,000.00	1,000.00

Total: 6,894.76 6,894.76

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B6D (Official Form 6D) (12/07)

	Claudia Torres	
In re	Nicholas Torres,	Case No
•		

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

	8							
CDEDITODIS NAME			C Husband, Wife, Joint, or Community			D	AMOUNT OF	
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONF-ZGEZ	UNLLQULDATED	SPUTED	CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.				┰	T E			
			Value \$		D			
Account No.		П						
			Value \$					
A		⊢	value \$	Н		Н		
Account No.			Value \$					
Account No.								
		L	Value \$					
continuation sheets attached			S (Total of th	ubto nis p				
Total					1	0.00	0.00	
(Report on Summary of Schedules					s)	0.00	3.00	

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B6E (Official Form 6E) (4/13)

·				
In re	Nicholas Torres,		Case No.	
	Claudia Torres			
_		Debtors	,	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules. Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) ☐ Domestic support obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). ☐ Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). ☐ Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). ☐ Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). ☐ Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). ☐ Deposits by individuals Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). ■ Taxes and certain other debts owed to governmental units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). ☐ Commitments to maintain the capital of an insured depository institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). ☐ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

continuation sheets attached

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6E (Official Form 6E) (4/13) - Cont.

In re	Nicholas Torres,		Case No.	
	Claudia Torres			
_		Debtors	,	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, NLIQUIDATED ONTINGENT SPUTED AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED AMOUNT INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM C AMOUNT ENTITLED TO PRIORITY AND ACCOUNT NUMBER (See instructions.) 02/1/2013 Account No. xx5304 Government Agency Food Stamp Illinois Dept of Human Resourse Charge 0.00 PO Box 19502 Springfield, IL 62794 Н 1,012.67 1,012.67 Account No. Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 1,012.67 1,012.67 0.00 (Report on Summary of Schedules) 1,012.67 1,012.67 Case 15-08297 Doc 1 Filed 03/09/15 Entered 03/09/15 18:12:15 Desc Main Document Page 18 of 56

B6F (Official Form 6F) (12/07)

In re	Nicholas Torres, Claudia Torres		Case No.	
_		Debtors		

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE,	C O D E B T	H H W		CONT	UZLLQU.	DISPUTED	
AND ACCOUNT NUMBER (See instructions above.)	T O R	C	IS SUBJECT TO SETORE SO STATE	NGEN	ULDAT	I -	AMOUNT OF CLAIM
Account No. xxxxxxxx3341			11/4/2014 Medical emergency Room	Ť	T E D	1	
Alexian Brothers PO Box 3495		H					
Toledo, OH 43607							
							75.00
Account No. xxxxxxxx7417			09/26/2014 Medical Emergency				
Alexian Brothers		l					
PO Box 3495 Toledo, OH 60160		Н					
							75.00
Account No. xxx9365			02/19/2015	+			73.00
			Medical				
Alexian Brothers PO Box 0404		Н					
The Medical Care Group Des Plaines,, IL 60016							
Des Flames,, iL 00010							49.60
Account No. xxxx*xxxxx778.1			09/30/2014 Medical Collections for Alexian Brothers				
Alexian Brothers							
PO BOX 5967	1	W	1				
Carol Sream, IL 60197							
							10.62
10 continuation sheets attached			(Total of	Sub			210.22

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B6F (Official Form 6F) (12/07) - Cont.

In re	Nicholas Torres,	Case No.
_	Claudia Torres	

				_	_			
CREDITOR'S NAME,	C	Ηι	usband, Wife, Joint, or Community		U	D		
MAILING ADDRESS	CODEBTOR	Н		CON	U N L	s		
INCLUDING ZIP CODE,	E	w	DATE CLAIM WAS INCURRED AND	T	I,	PUTE	.	
AND ACCOUNT NUMBER	Ĭ	J	CONSIDERATION FOR CLAIM. IF CLAIM	Ņ	Ü	ΙŤ	I	AMOUNT OF CLAIM
(See instructions above.)	O R	С	IS SUBJECT TO SETOFF, SO STATE.	G	Ι'n	ΙĒ	.	
	↓ ``	╀		NGENT	D A T E D	ľ	\vdash	
Account No. xxxxxxxx1625			05/14/2014	'	Ė			
			Medical	\vdash	ᆫ	┺	4	
Alexian Brothers								
PO Box 3495		w	/					
Toledo, OH 43607								
1 101000, 011 40007								
								150.00
Account No. xxxxxxxx5578			11/25/2013	T	T	T	\top	
	1		Medical					
Alexian Brothers								
PO Box 3495		w						
		''						
Toledo, OH 43607								
								750.00
Account No. xxxxxxxx8692	╅	t	04/15/2014	+	╁	t	+	
recount 110. AAAAAAAAOOOZ	-		Medical					
l., , , ,			Medical					
Alexian Brothers		١						
PO Box 3495		W						
Toledo, OH 43607								
								150.00
Account No. xxxxxxxx2380	╁	+	05/2/2014	+	┢	┢	+	
Account No. XXXXXXXZ360	4		Medical					
			Medical					
Alexian Brothers		l						
PO Box 3495		W						
Toledo, OH 43607								
								150.00
Account No. xxxxxxxx6068	╁	+	07/25/2014	+	\vdash	┝	+	
Account No. AAAAAAAAOUOO	1	1	Medical	1				
1	1	1	Medical	1	1			
Alexian Brothers	1	1		1	1			
PO Box 3495		W			1	1		
Toledo, OH 43607	1	1		1				
	1	1		1				
	1							85.63
				<u></u>	上	L	+	
Sheet no. <u>1</u> of <u>10</u> sheets attached to Schedule of				Subt				1,285.63
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	paş	ge)		1,200.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Nicholas Torres,	Case No.	
	Claudia Torres	,	

CREDITOR'S NAME,	Ç	Ηι	sband, Wife, Joint, or Community	C	U	P	П	
MAILING ADDRESS	ODEBTOR	Н	DATE CLAIM WAS INCUIDED AND	CONT	UNLLQU.	Į	3	
INCLUDING ZIP CODE,	B	W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	-11	ď	۱۲ U	١	
AND ACCOUNT NUMBER	T	C	IS SUBJECT TO SETOFF, SO STATE.	N G				AMOUNT OF CLAIM
(See instructions above.)	Ř	١	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	G E N	D A T	Ī		
Account No. xxxxxxxx3257			01/26/2015	Τ̈́	T		ı	
	1		Medical		D		-	
Alexian Brothers					Г	T	٦	
PO Box 3495		lw					-	
Toledo, IL 43607							-	
1 10000							-	
							-	14.59
				丄	L	L	┙	14.55
Account No. xxxxxxxx2778			01/27/2015				-	
	1		Medical				-	
Alexian Brothers							-	
PO Box 3495		W					-	
Toledo, OH 43607							-	
							-	
								270.79
Account No. xxxxxxxx7318	╂	\vdash	01/28/2015	+	⊢	╁	+	
Account No. XXXXXXX7316	1		Medical				-	
l.,			Wedical				-	
Alexian Brothers		W					-	
PO Box 3495		**					-	
Toledo, IL 43607							-	
							-	
								75.00
Account No. xxxxxxxx3536			02/9/2015					
	1		Medical				-	
Alexian Brothers							-	
PO Box 3495		W					-	
Toledo, OH 43607							-	
							-	
								455.15
Account No. xxx6520	╁	+	05/15/2014	+	\vdash	+	+	
Ticcount 110. AAAUUZU	1		Medical					
Alexian Brothers								
PO Box 0404		J			1	b	ĸ	
The Medical Care Group						Ι΄		
Des Plaines, IL 60016								
Des Idilies, IL 000 0								705.00
				\perp				785.00
Sheet no. 2 of 10 sheets attached to Schedule of				Subt	tota	ıl		4.000.50
Creditors Holding Unsecured Nonpriority Claims			(Total of t	this	nas	œ)	١	1,600.53

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B6F (Official Form 6F) (12/07) - Cont.

In re	Nicholas Torres,	Case No.
_	Claudia Torres	

CREDITOR'S NAME,	Č	Hu	sband, Wife, Joint, or Community	C	Ų	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONT INGEN	NL I QU I DATE	DISPUTED	AMOUNT OF CLAIN
Account No. xxxxxxA380			02/4/2015	Т	E		
Alexian Pediatric Specialty 3040 Salt Creek Lane Arlington Heights, IL 60005		w	Medical		D		12.50
Account No.			Other Debt Rent				12.00
Ampol Development PO Box 101160 Chicago, IL 60610		J					
Account No. xxxxx2459			01/31/2015				995.00
AT&T Uverse 444 Highway 96 East PO Box 64794 St. Paul, MN 55164		w	Internet				267.24
Account No. xxxxxxxxxxx4352	+		Credit Card				
Capital One PO Box 6492 Carol Stream, IL 60197		J					
Account No. xxxxxx3115			Personal Loan				420.79
Check n Go PO Box 1259 Oaks, PA 19456		w					
							1,087.46
Sheet no. 3 of 10 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	f		(Total o	Sub			2,782.99

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B6F (Official Form 6F) (12/07) - Cont.

In re	Nicholas Torres,	Case No.
	Claudia Torres	

CDEDITORIS NAME	С	Hu	sband, Wife, Joint, or Community	С	U	D	
CREDITOR'S NAME, MAIL.ING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H & J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	UNLIQUIDATE	D I S P U T E D	AMOUNT OF CLAIM
Account No. 7409			Credit Card	7	T E D		
Citibank 12339 Cutten Road Houston, TX 77066		w					700.09
Account No. xxxxxxxxxxx2651	-		02/8/2015	+			1 00000
Comcast 155 Industrial Dr. Elmhurst, IL 60126		Н	Utility Bill				04040
Account No. xxxxxxxxxxx6306	_		2010/2020	\bot			319.13
Comcast PO Box 3002 Southeastern, PA 19398		Н	02/6/2009 Utility Bill				1,112.72
Account No. xxxxxx2051	╁		02/11/2015	+			,
ComEd PO Box 6111 Carol Sream, IL 60197		w	Utility Bill				111.92
Account No. xxxxxx9051			09/9/2009	+			111.92
ComEd 26499 PO Box 212609 Augusta, GA 30917		н	Utility Bill				
							734.24
Sheet no. <u>4</u> of <u>10</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub this			2,978.10

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B6F (Official Form 6F) (12/07) - Cont.

In re	Nicholas Torres,	Case No.
_	Claudia Torres	

	С	Ни	sband, Wife, Joint, or Community	Tc	Ιυ	ΤD	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	ΙQ	D I S P U T E D	AMOUNT OF CLAIM
Account No.			Credit Card	Т	E D		
Credit One Bank PO Box 98872 Las Vegas, NV 89193		W			D		1,702.00
Account No. xxxxxxX4-70	+		Date Opened: Last Used: 08/7/2014	+			1,1 02.00
CTRL CU ILL 1001 Mannheim Road Bellwood, IL 60104		W	Credit Card				
							2,632.29
Account No. xxx-xxxxxx9416 DBA Cook CNTY Health PO Box 808 Grand Rapids, MI 49518		w	05/16/2012 Medical				317.00
Account No. xxxx2410	+		04/3/2014	+			
Dr. Lipowich PO Box 2240 Burlington, NC 27216		w	Medical				99.00
Account No. xx8151	+	\vdash	02/15/2015	+	+	\vdash	33.00
Dr. Lipowich 800 Biesterfield Road Elk Grove Village, IL 60007		w	Medical				
							17.00
Sheet no. <u>5</u> of <u>10</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	f		(Total of	Sub this			4,767.29

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B6F (Official Form 6F) (12/07) - Cont.

In re	Nicholas Torres,	Case No.
_	Claudia Torres	

						_		
CREDITOR'S NAME,	CODEBTOR	1	sband, Wife, Joint, or Community	C O N T	UNLI	D		
MAILING ADDRESS INCLUDING ZIP CODE,	E	H W	DATE CLAIM WAS INCURRED AND	T	l Q	P		
AND ACCOUNT NUMBER (See instructions above.)	T	C	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	N G E N		U T E	AMOUNT OF	CLAIM
	R	Ĺ		E N T	D A T	D		
Account No. 5789			02/15/2015 Medical	!	Ė			
Dr. Lipowich			Medical		T	t	1	
800 Biesterfield Road		w						
Elk Grove Village, IL 60007								
							3	328.31
Account No. xxx xxxxx758B	┝		10/1/2013	╁	├	\vdash		
	1		Medical					
Elk Grove Radiology		w						
Po Box 4543 Carol Sream, IL 60197		vv						
Carol Gream, IL 60197								
							4	68.00
Account No. xxxxxxxxxxxx9170			Credit Card	T	Г			
 First Premier Bank								
PO Box 5529		н						
Sioux Falls, SD 57117								
								07.50
Account No. xx4913	_		11/25/2014	╄	Ļ		3	887.56
Account No. XX4913	ł		Personal Loan Car Loan, Reposession					
Heritage Acceptance Corp								
121 South Main St		Н						
Elkhart, IN 46516-3123								
							18.4	24.68
Account No. xxxxxxx4728	\vdash	\vdash	Credit card	+	\vdash	+	1	
	1							
JP Morgan Chase Bank		١.						
PO Box 15298 Wilmington, DE 19850		J						
17								
							5	14.89
Sheet no. 6 of 10 sheets attached to Schedule of				Subt			20.1	23.44
Creditors Holding Unsecured Nonpriority Claims			(Total of t	nis	pag	ge)		•

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B6F (Official Form 6F) (12/07) - Cont.

In re	Nicholas Torres,	Case No.
_	Claudia Torres	

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	J M H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONTINGEN	N L Q U L D A	D I S P U T E D	AMOUNT OF CLAIN
Account No.			Credit Card	٦т	E		
JP Morgan Chase Bank PO Box 15298 Wilmington, DE 19850		w			D		709.00
Account No. xxxxxxx6491			06/22/2013		<u> </u>		709.00
Laboratory Corporation of Amer 4 Westchester Plaza Suite 110 Elmsford, NY 10523		w	Medical Pregnancy				
							99.00
Account No. x0051 Loyola Medicine 2 Westbrook Corp Center Suite 700 Westchester, IL 60154		н	03/11/2015 Medical				36.49
Account No. xx4728			02/23/2015				
Loyola Medicine Two Westbrook Corp Center, Suite 700 Westchester, IL 60160		н	Medical Emergency at Gottlieb Memorial				150.00
Account No. 6594	+		Medical	+	+	\vdash	
Mariusz KOZIOL 810 BIESTERFIELD rD Elk Grove Village, IL 60007		w					190.00
Sheet no7 of _10 _ sheets attached to Schedule of	of.			Sub	tota	1	130.00
Creditors Holding Unsecured Nonpriority Claims	71		(Total of				1,184.49

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B6F (Official Form 6F) (12/07) - Cont.

In re	Nicholas Torres,	Case No
_	Claudia Torres	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu: H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.		٦١١			AMOUNT OF CLAIM
Account No. 6594			Medical	∀ 1	T	:	ł	
Mariusz KOZIOL 810 BIESTERFIELD rD Elk Grove Village, IL 60007		w						190.00
Account No. x6796	╁		01/20/2015	+	+	+	$\frac{1}{1}$	
Midwest Children Heart Spec 1555 N Barrington Rd Hoffman Estates, IL 60169		w	Medical					14.38
Account No. xxxxxx6064	+		09/30/2009	+	+	+		14.30
Nicor Gas Company 2741 W Thomas St Chicago, IL 60622		Н	Utility Bill					
	_		20104/0045	1	1			119.91
Account No. x3394 Oncology & Heratology 3701 Algonquin RD. Suite 900 Rolling Meadowns, IL 60008		w	02/24/2015 Medical pregnancy					5.53
Account No. xxxxxxxx-xxx3377	╁		Personal Loan	+	+	+	+	0.30
One Main Financial PO Box 183172 Columbus, OH 43218		w						
								5,484.19
Sheet no. 8 of 10 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		•	(Total of	Sul)	5,814.01

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B6F (Official Form 6F) (12/07) - Cont.

In re	Nicholas Torres,	Case No.
_	Claudia Torres	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) Account No. xxxxxxxxxxxxx1419	CODEBTOR	Hus H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	- [I N G E N T	UNLIQUIDATE	D I S P U T E D	AMOUNT OF CLAIM
Paypal Credit PO Box 105658 Atlanta, GA 30348		w				D		553.47
Account No. xxxxxx9745 Quest Diagnostics PO Box 740397 Cincinnati, OH 45274		w	06/29/2014 Medical Blood					14.00
Account No. xxx5055 Santander PO Box 105255 Atlanta, GA 30348		w	Personal Loan Car Loan					23,457.10
Account No. xxxx-x-xxxxx5665 Speedy Cash PO Box 780408 Wichita, KS 67278		н	11/20/2014 Personal Loan					1,200.00
Account No. 9190 Suburban Maternal Fetal Medicine 1555 N Barrington Rd Bldg 1 Ste 215 Hoffman Estates, IL 60169		J	10/14/2014 Medical					156.80
Sheet no. 9 of 10 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total o	Su f thi				25,381.37

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B6F (Official Form 6F) (12/07) - Cont.

In re	Nicholas Torres,	Case No.
_	Claudia Torres	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) Account No. xxx-xx5876 Village of Schiller Park PO Box 88850 Carol Sream, IL 60188	CODEBTOR	Hu: H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. 05/14/2014 Medical	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. xxxxx2745 Westlake Hospital 1225 Westlake Street Melrose Park, IL 60160		н	01/21/2015 Medical			x	706.00
Account No. xxxxx7518 Westlake Hospital 1225 Westlake Street Melrose Park, IL 60160		н	08/11/2014 Medical				9,283.60
Account No. xxxxx3799 Westlake Hospital 1225 Westlake Street Melrose Park, IL 60160		н	Medical				171.24
Account No.							
Sheet no10_ of _10_ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub this			10,235.84
			(Report on Summary of S		Γota dule		76,363.91

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B6G (Official Form 6G) (12/07)

In re	Nicholas Torres,	Case No.
	Claudia Torres	

Debtors

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Pam Fese 1743 N 19th Ave Melrose Park, IL 60160 Lesee on signed 06/1/2014 expires 05/30/2015

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B6H (Official Form 6H) (12/07)

In re	Nicholas Torres,	Case No.
	Claudia Torres	

Debtors

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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Fill	in this information to identify your c	ase:		
Deb	otor 1 Nicholas To	rres		
	otor 2 Claudia Toruuse, if filing)	res		
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS	
	se number 		-	Check if this is: ☐ An amended filing ☐ A supplement showing post-petition chapter 13 income as of the following date:
Of	fficial Form B 6I			MM / DD/ YYYY
So	chedule I: Your Inc	ome		12/13
spo	use. If you are separated and you ch a separate sheet to this form.	r spouse is not filing wi	ith you, do not include information	g with you, include information about your about your spouse. If more space is needed, ase number (if known). Answer every question
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed	■ Employed□ Not employed
	employers.	Occupation	Sales Manager	Team Leader
	Include part-time, seasonal, or self-employed work.	Employer's name	Comfort Inn Downers Grove	Princecastle
	Occupation may include student or homemaker, if it applies.	Employer's address	3010 Finely Rd Downers Grove, IL 60515	355 Kehoe Blvd Carol Stream, IL 60188

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

How long employed there?

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

0 Years, 10 Months

2 Years, 0 Months

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 2,374.99 2,229.07 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 3. 0.00 +\$ 0.00 Calculate gross Income. Add line 2 + line 3. 2,374.99 2,229.07

Official Form B 6I Schedule I: Your Income page 1

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Nicholas Torres

Debtor 1

Claudia Torres Debtor 2 Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 2.374.99 2.229.07 List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 5a. 442.67 301.49 5b. Mandatory contributions for retirement plans 5b. \$ 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00 Required repayments of retirement fund loans 5d. 5d. \$ 0.00 \$ 0.00 5e Insurance 5e. \$ \$ 0.00 372.02 5f. **Domestic support obligations** 5f. 0.00 0.00 5g. **Union dues** 5g. 0.00 0.00 5h. Other deductions. Specify: 401K 5h.+ 0.00 133.75 **Dental** 0.00 17.33 Vision 0.00 10.10 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 442.67 \$ 6 834.69 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 7. 1,932.32 1,394.38 8 List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. 0.00 0.00 8h. Interest and dividends 8h. 0.00 0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 **Unemployment compensation** 8d. 8d. 0.00 0.00 8e. **Social Security** 8e. 0.00 0.00 Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. Specify: 0.00 0.00 8g. Pension or retirement income 8g. 0.00 0.00 Other monthly income. Specify: 8h.+ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 0.00 0.00 10. Calculate monthly income. Add line 7 + line 9. \$ 10. 1,932.32 1,394.38 \$ 3,326.70 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 3,326.70 12 applies Combined monthly income Do you expect an increase or decrease within the year after you file this form? No. Yes. Explain:

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Fill	in this informa	ation to identify your case:				
Deb	otor 1	Nicholas Torres			k if this is:	
Deh	otor 2	Claudia Torres		_	An amended filing	ving post-petition chapter
	ouse, if filing)	Claudia Torres			13 expenses as of	
Unit	ted States Bank	ruptcy Court for the: NORTHERN DISTRICT OF ILLIN	OIS	=	MM / DD / YYYY	
0					A concrete filing fo	r Debtor 2 because Debtor
	se number nown)	·			2 maintains a sepa	
0	fficial Fo	orm B 6J				
		J: Your Expenses				12/13
		and accurate as possible. If two married people ar	e filing together, bo	oth are equa	ally responsible fo	
info	ormation. If m	nore space is needed, attach another sheet to this vn). Answer every question.	form. On the top of	any additio	nal pages, write y	our name and case
	<u> </u>	,				
Par 1.	t 1: Desc Is this a joi	ribe Your Household				
١.	□ No. Go to					
	_	es Debtor 2 live in a separate household?				
	■ N	•				
		vo ′es. Debtor 2 must file a separate Schedule J.				
2.	Do you hav	ve dependents? □ No				
	Do not list D Debtor 2.	Debtor 1 and Yes. Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state	e the				□ No
	dependents	'names.	son		5 months	■ Yes
			Son		1 year	□ No ■ Yes
					<u> </u>	■ res
			Mother In Law		53	■ Yes
						□ No
_	_					☐ Yes
3.	•	penses include Mo No				
		d your dependents?				
Par	t 2: Estim	nate Your Ongoing Monthly Expenses				
Est	imate your e	xpenses as of your bankruptcy filing date unless y				
	penses as of a colicable date.	a date after the bankruptcy is filed. If this is a supp	olemental Schedule	J, check th	e box at the top o	f the form and fill in the
		es paid for with non-cash government assistance i th assistance and have included it on <i>Schedule I:</i>)				
	ficial Form 6		our meome		Your expe	enses
4.	The rental (or home ownership expenses for your residence.	nclude first mortgage			
٦.		nd any rent for the ground or lot.	noidae inst mortgage	4. \$		1,000.00
	If not include	ded in line 4:				
	4a. Real	estate taxes		4a. \$		0.00
	4b. Prope	erty, homeowner's, or renter's insurance		4b. \$		0.00
		e maintenance, repair, and upkeep expenses		4c. \$		0.00
5.		eowner's association or condominium dues mortgage payments for your residence, such as ho	me equity loops	4d. \$ 5. \$		0.00
J.	Auditional	mongage payments for your residence, such as NO	THE Equity IDAHS	J. J		v.uu

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heat, natural gas wer, garbage collection e, cell phone, Internet, satellite, and cable services ecify: ekeeping supplies children's education costs ry, and dry cleaning products and services Include gas, maintenance, bus or train fare. ar payments. clubs, recreation, newspapers, magazines, and books ributions and religious donations assurance deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or	Case number (if known) 6a. \$ 6b. \$ 6c. \$ 6d. \$ 7. \$ 8. \$ 9. \$ 10. \$ 11. \$ 12. \$ 13. \$ 14. \$ 15a. \$ 15b. \$ 15c. \$ 15d. \$ 17a. \$ 17b. \$	150.00 0.00 350.00 0.00 400.00 250.00 100.00 80.00 150.00 280.00 100.00 0.00 0.00 74.55 0.00
wer, garbage collection a, cell phone, Internet, satellite, and cable services excify: excepting supplies children's education costs ry, and dry cleaning products and services Include gas, maintenance, bus or train fare. Include gas, maintenance, bus or train fare. Include, recreation, newspapers, magazines, and books ributions and religious donations Insurance deducted from your pay or included in lines 4 or 20. Ince Ince Ince Ince Ince Ince Ince Ince	6b. \$ 6c. \$ 6d. \$ 7. \$ 8. \$ 9. \$ 10. \$ 11. \$ 12. \$ 13. \$ 14. \$ 15a. \$ 15b. \$ 15c. \$ 15d. \$ 17a. \$	0.00 350.00 0.00 400.00 250.00 100.00 80.00 150.00 280.00 0.00 0.00 74.55 0.00
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ekeeping supplies children's education costs ry, and dry cleaning products and services Include gas, maintenance, bus or train fare. Include, recreation, newspapers, magazines, and books ributions and religious donations Insurance deducted from your pay or included in lines 4 or 20. Ince Ince Increase Include taxes deducted from your pay or included in lines 4 or 20. Increase payments: Increase payme	6d. \$ 7. \$ 8. \$ 9. \$ 10. \$ 11. \$ 12. \$ 13. \$ 14. \$ 15a. \$ 15b. \$ 15c. \$ 15d. \$ 16. \$ 17a. \$	0.00 400.00 250.00 100.00 80.00 150.00 280.00 100.00 0.00 0.00 74.55 0.00
chekeeping supplies children's education costs ry, and dry cleaning products and services Include gas, maintenance, bus or train fare. ar payments. clubs, recreation, newspapers, magazines, and books ributions and religious donations assurance deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include	7. \$ 8. \$ 9. \$ 10. \$ 11. \$ 12. \$ 13. \$ 14. \$ 15a. \$ 15b. \$ 15c. \$ 15d. \$ 17a. \$	400.00 250.00 100.00 80.00 150.00 280.00 100.00 0.00 0.00 74.55 0.00
children's education costs ry, and dry cleaning products and services Include gas, maintenance, bus or train fare. ar payments. clubs, recreation, newspapers, magazines, and books ributions and religious donations assurance deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from	8. \$ 9. \$ 10. \$ 11. \$ 12. \$ 13. \$ 14. \$ 15a. \$ 15b. \$ 15c. \$ 15d. \$ 16. \$ 17a. \$	250.00 100.00 80.00 150.00 280.00 100.00 0.00 0.00 74.55 0.00
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·	17c. \$	0.00
	17d. \$	0.00
of alimony, maintenance, and support that you did not report a	as 18. \$	0.00
your pay on line 5, Schedule I, Your Income (Official Form 6I). s you make to support others who do not live with you.	\$	
s you make to support others who do not live with you.	· —	0.00
erty expenses not included in lines 4 or 5 of this form or on Sc		
		0.00
	· · · · · · · · · · · · · · · · · · ·	0.00
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·	·	0.00
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Support of diabled parents fleeds		300:00
	22. \$	3,434.55
		_
	οο Φ	
,		3,326.70
monthly expenses from line 22 above.	23b\$	3,434.55
	23c. \$	-107.85
	erty expenses not included in lines 4 or 5 of this form or on So son other property e taxes homeowner's, or renter's insurance hoce, repair, and upkeep expenses er's association or condominium dues support of diabled parents needs xpenses. Add lines 4 through 21. r monthly expenses. monthly net income. 12 (your combined monthly income) from Schedule I. r monthly expenses from line 22 above. our monthly expenses from your monthly income. is your monthly net income.	e taxes 20b. \$

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B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court Northern District of Illinois

In re	Nicholas Torres Claudia Torres		Case No.	
		Debtor(s)	Chapter	7

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

			ad the foregoing summary and schedules, consisting of y knowledge, information, and belief.	27
Date	March 9, 2015	Signature	/s/ Nicholas Torres Nicholas Torres	
			Debtor	
Date	March 9, 2015	Signature	/s/ Claudia Torres Claudia Torres	

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Joint Debtor

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B7 (Official Form 7) (04/13)

United States Bankruptcy Court Northern District of Illinois

In re	Nicholas Torres Claudia Torres		Case No.	
		Debtor(s)	Chapter	7

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNI	SOURCE
\$4,375.91	2015 Wife Comfort Inn Downers Grove
\$10,298.30	2014 Wife Comfort Inn Downers Grove
\$4,385.32	2015 Husband Princecastle
\$21,378.08	2014 Husband Princecastle

ANGUNE

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2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF **PAYMENTS**

AMOUNT PAID

AMOUNT STILL **OWING**

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not

> DATES OF PAYMENTS/ **TRANSFERS**

AMOUNT PAID OR VALUE OF **TRANSFERS**

AMOUNT STILL **OWING**

NAME AND ADDRESS OF CREDITOR

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL **OWING**

4. Suits and administrative proceedings, executions, garnishments and attachments

None

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER

NATURE OF **PROCEEDING** COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF **PROPERTY**

 $[^]st$ Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR

AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

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10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

LOCATION OF PROPERTY

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

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15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS 9231 W Irving Park Rd Schiller Park IL 60176-0000 NAME USED Claudia Romo

DATES OF OCCUPANCY 8/15/2012-05/30/2014

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

ENVIRONMENTAL

NOTICE LAW

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six vears immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

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B7 (Official Form 7) (04/13)

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20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

None

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

None

ADDRESS

DATE OF WITHDRAWAL

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * * *

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	March 9, 2015	Signature	/s/ Nicholas Torres
			Nicholas Torres
			Debtor
_			
Date	March 9, 2015	Signature	/s/ Claudia Torres
			Claudia Torres
			Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B8 (Form 8) (12/08)

United States Bankruptcy Court Northern District of Illinois

In re	Nicholas Torres Claudia Torres			Case No.	
	Oldudia Torres		Debtor(s)	Chapter 7	
PART	CHAPTER 7 INI A - Debts secured by property of property of the estate. Attach ac	the estate. (Part A			secured by
Propert	ty No. 1				
Creditor's Name: -NONE-		Describe Property Securing Debt:			
-	ty will be (check one): Surrendered	☐ Retained			
	ning the property, I intend to (check Redeem the property Reaffirm the debt Other. Explain		oid lien using 11 U.S.C	f. § 522(f)).	
	ty is (check one): Claimed as Exempt		☐ Not claimed as ex	empt	
	B - Personal property subject to unexadditional pages if necessary.)	spired leases. (All three	ee columns of Part B mu	ast be completed for each unexp	ired lease.
Propert	ty No. 1				
Lessor -NONE	's Name: -	Describe Leased P	roperty:	Lease will be Assumed pursua U.S.C. § 365(p)(2): ☐ YES ☐ NO	ant to 11
	re under penalty of perjury that th al property subject to an unexpired		y intention as to any pi	roperty of my estate securing a	a debt and/or
Date <u>I</u>	March 9, 2015	_ Signature	/s/ Nicholas Torres Nicholas Torres Debtor		
Date <u>I</u>	March 9, 2015	Signature	/s/ Claudia Torres Claudia Torres		

Joint Debtor

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United States Bankruptcy Court Northern District of Illinois

In re	Nicholas Torres Claudia Torres		Case No).	
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	ENSATION OF ATTO	RNEY FOR I	DEBTOR(S)	
ŗ	rursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 20 aid to me within one year before the filing of the petit ehalf of the debtor(s) in contemplation of or in connection	ion in bankruptcy, or agreed to	be paid to me, for s		
				1,700.00	
	Prior to the filing of this statement I have received		\$	1,700.00	
	Balance Due		\$	0.00	
2. \$	335.00 of the filing fee has been paid.				
3. 1	he source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. Т	he source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5. l	I have not agreed to share the above-disclosed com	pensation with any other person	n unless they are me	mbers and associates of	f my law firm.
I	☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the na				aw firm. A
5. l	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
b c	Analysis of the debtor's financial situation, and rend. Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of creditation of the debtor at the meeting of creditation. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications of the secure of the se	tement of affairs and plan whice tors and confirmation hearing, a reduce to market value; ex ons as needed; preparation	th may be required; and any adjourned be semption plannir	earings thereof; g; preparation and f	iling of
7. F	by agreement with the debtor(s), the above-disclosed for Representation of the debtors in any disany other adversary proceeding.			nces, relief from stay	/ actions or
		CERTIFICATION			
	certify that the foregoing is a complete statement of a inkruptcy proceeding.	ny agreement or arrangement fo	or payment to me fo	r representation of the d	ebtor(s) in
Dated	March 9, 2015	/s/ Jennifer A. B Jennifer A. Blan Law Offices of J 1 Westbrook Co Suite 300 Westchester, IL 708-848-5291 blanclaw@sbcg	c 6257505 lennifer A. Blanc rporate Center 60154		

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the

Form B 201A, Notice to Consumer Debtor(s)

Page 2

Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

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B 201B (Form 201B) (12/09)

United States Bankruptcy Court Northern District of Illinois

	1401	therm District of Infinois		
In re	Nicholas Torres Claudia Torres		Case No.	
		Debtor(s)	Chapter 7	
	Ce	OF THE BANKRUPT ertification of Debtor	CCY CODE	
Code.	I (We), the debtor(s), affirm that I (we) have rec	ceived and read the attached r	notice, as required by	§ 342(b) of the Bankruptcy
	las Torres ia Torres	X /s/ Nicholas T	orres	March 9, 2015
Printed	d Name(s) of Debtor(s)	Signature of D	Debtor	Date
Case N	No. (if known)	X /s/ Claudia To	orres	March 9, 2015
		Signature of Jo	oint Debtor (if any)	Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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United States Bankruptcy Court Northern District of Illinois

In re	Nicholas Torres Claudia Torres		Case No.	
	Olduda 16.100	Debtor(s)	Chapter 7	
	•	VERIFICATION OF CREDITOR M	IATRIX	
		Number of	Number of Creditors:	
	(our) knowledge.			
Date:	March 9, 2015	/s/ Nicholas Torres		
		Nicholas Torres		
		Signature of Debtor		
Date:	March 9, 2015	/s/ Claudia Torres		
		Claudia Torres		
		Signature of Debtor		

Alexian Brothers PO Box 3495 Toledo, OH 43607

Alexian Brothers PO Box 3495 Toledo, OH 60160

Alexian Brothers PO Box 0404 The Medical Care Group Des Plaines,, IL 60016

Alexian Brothers PO BOX 5967 Carol Sream, IL 60197

Alexian Brothers PO Box 3495 Toledo, OH 43607

Alexian Brothers PO Box 3495 Toledo, IL 43607

Alexian Brothers PO Box 3495 Toledo, OH 43607 Alexian Brothers PO Box 3495 Toledo, IL 43607

Alexian Brothers PO Box 3495 Toledo, OH 43607

Alexian Brothers PO Box 0404 The Medical Care Group Des Plaines, IL 60016

Alexian Pediatric Specialty 3040 Salt Creek Lane Arlington Heights, IL 60005

Alliance Pathology Consultants PO BOX 5967 Carol Stream, IL 60197

AlliedInterstate N/A N/A, DE 19850

AMCA
PO Box 1235
Elmsford, NY 10523

Ampol Development PO Box 101160 Chicago, IL 60610

Asset Acceptance LLC 2741 W Thomas Chicago, IL 60622

AT&T Uverse 444 Highway 96 East PO Box 64794 St. Paul, MN 55164

Capital One PO Box 6492 Carol Stream, IL 60197 Check n Go PO Box 1259 Oaks, PA 19456

Citibank 12339 Cutten Road Houston, TX 77066

Comcast 155 Industrial Dr. Elmhurst, IL 60126

Comcast PO Box 3002 Southeastern, PA 19398

ComEd PO Box 6111 Carol Sream, IL 60197

ComEd 26499 PO Box 212609 Augusta, GA 30917

Comenity Capital Bank 2420 Sweet Home Rd Ste 150 Amherst, NY 14228

Contract Callers Inc 1058 Claussen Road Austa, GA 30917

Credit One Bank PO Box 98872 Las Vegas, NV 89193

Credit Protection Association PO Box 3002 Southeastern, PA 19398

CTRL CU ILL 1001 Mannheim Road Bellwood, IL 60104 DBA Cook CNTY Health PO Box 808 Grand Rapids, MI 49518

Dr. Lipowich PO Box 2240 Burlington, NC 27216

Dr. Lipowich 800 Biesterfield Road Elk Grove Village, IL 60007

Dr. Lipowich 800 Biesterfield Road Elk Grove Village, IL 60007

Elk Grove Radiology Po Box 4543 Carol Sream, IL 60197

First National Collection Bureau 610 Waltham Way Sparks, NV 89434

First Premier Bank PO Box 5529 Sioux Falls, SD 57117

Fma & Confidential 12339 Cutten Houston, TX 77066

Heritage Acceptance Corp 121 South Main St Elkhart, IN 46516-3123

IC System
444 Highway 96 East
PO Box 64794
St. Paul, MN 55164

Illinois Dept of Human Resourse PO Box 19502 Springfield, IL 62794 JP Morgan Chase Bank PO Box 15298 Wilmington, DE 19850

JP Morgan Chase Bank PO Box 15298 Wilmington, DE 19850

Laboratory Corporation of Amer 4 Westchester Plaza Suite 110 Elmsford, NY 10523

LCA Collections PO Box 2240 Burlington, NC 27216

Loyola Medicine 2 Westbrook Corp Center Suite 700 Westchester, IL 60154

Loyola Medicine Two Westbrook Corp Center, Suite 700 Westchester, IL 60160

Malcom S Gerald and Associates 332 South Michigan Avenue Chicago, IL 60604

Malcom S Gerald and Associates 332 South Michigan Avenue Chicago, IL 60604

Mariusz KOZIOL 810 BIESTERFIELD rD Elk Grove Village, IL 60007

Mariusz KOZIOL 810 BIESTERFIELD rD Elk Grove Village, IL 60007

Midwest Children Heart Spec 1555 N Barrington Rd Hoffman Estates, IL 60169 Nicor Gas Company 2741 W Thomas St Chicago, IL 60622

Oncology & Heratology 3701 Algonquin RD. Suite 900 Rolling Meadowns, IL 60008

One Main Financial PO Box 183172 Columbus, OH 43218

Pam Fese 1743 N 19th Ave Melrose Park, IL 60160

Paypal Credit PO Box 105658 Atlanta, GA 30348

Quest Diagnostics PO Box 740397 Cincinnati, OH 45274

Real Time PO Box 1259 Oaks, PA 19456

Santander PO Box 105255 Atlanta, GA 30348

Speedy Cash PO Box 780408 Wichita, KS 67278

Suburban Maternal Fetal Medicine 1555 N Barrington Rd Bldg 1 Ste 215 Hoffman Estates, IL 60169

Village of Schiller Park PO Box 88850 Carol Sream, IL 60188 Westlake Hospital 1225 Westlake Street Melrose Park, IL 60160

Westlake Hospital 1225 Westlake Street Melrose Park, IL 60160

Westlake Hospital 1225 Westlake Street Melrose Park, IL 60160